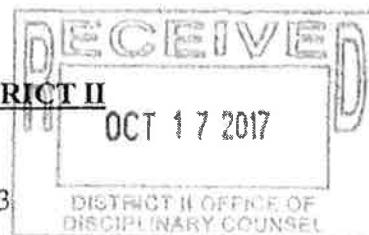


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Form DB-2
Rev. 07/14/11

Date sent

**OFFICE OF DISCIPLINARY COUNSEL - DISTRICT II**

820 ADAMS AVENUE, SUITE 170
TROOPER, PA 19403-2328
PHONE: 610-650-8210 FAX: 610-650-8213
website: www.padisciplinaryboard.org

COMPLAINT INFORMATION FORM

(Please Type or Print)

Date: 9-30-17**A. COMPLAINANT:**

Mr./Mrs. _____
 Your Name: Miss/Ms. FAUNFLEROY SARAH
 (Last) (First) (MI)

Address: 1634 N 30th ST. PHILA PA 19121
 (Street) (City) (State) (Zip Code)

Telephone: Home: 215-969-3969; Work: 267-601-0041-CARETAKER
 (Area Code) (Number) (Area Code) (Number)

B. ATTORNEY COMPLAINED OF:

Name: CONNER John K County: Tenkintown
 (Last) (First) (MI)
 Office Address: 766 Old York Rd. Tenkintown PA 19046
 (Street) (City) (State) (Zip Code)

Telephone: Office: _____ : Other: _____
 (Area Code) (Number) (Area Code) (Number)

C. PRIOR COMPLAINTS CONCERNING THIS MATTER OR THIS ATTORNEY:

Have you previously filed a complaint concerning this matter or this attorney with the Disciplinary Board, a Bar Association or its Fee Dispute Committee, any District Justice, Court, District Attorney or any other agency or office:

YES NO. If so, please identify the agency and specify the date and nature of your complaint and the action taken by the agency: ALAN DAVIS

Not enough information, where all my information copy

D. INSTRUCTIONS:

A written and signed statement of the facts must be filed with the Disciplinary Board before your complaint can be considered. Therefore, on the reverse side of this form, under STATEMENT OF COMPLAINT, please fully and completely set forth all of the facts and circumstances of your complaint. PLEASE BE SPECIFIC, referring to relevant dates, contacts you made with the attorney, the fee arrangement, amounts paid to the attorney and when, services to be performed, the names and addresses of other individuals involved in the legal matter, EXACTLY WHAT CONDUCT YOU BELIEVE IS UNETHICAL OR ILLEGAL, etc.

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PLEASE ATTACH COPIES OF ALL CORRESPONDENCE AND/OR DOCUMENTS RELATING TO YOUR CASE. If you send original documents and wish them returned to you, check here . If you have not attached any documentation, please explain why:

E. STATEMENT OF COMPLAINT: (Note: Attach as many additional pages as necessary to fully set forth all of the relevant facts and circumstances surrounding your complaint).

On 8-3-16 John K Connors arrived at my residence Mrs Sarah Fauntleroy 1634 N 30th St Philadelphia Pa. 19121 John Connors received documents pertaining to my Mrs Fauntleroy Estate from Mr. Homer Hill who was my 1st Power of Attorney in which Mr. John Connors took all my personal mail too. Also on 8-3-16 Mr. John Connors paid to me in front of my caretakers He was going to ask my brother Loren Fauntleroy to loan him \$10,000⁰⁰ to pay her caretakers after he was able to access my bank accounts from in which I straightening out from Mr. Homer Hill my ex Power of Attorney. Mr. John Connors called Ms. Shelia Thomas and asked her to give him the total amount and to the caretakers. Ms. Thomas gave him Mr. John Connors a total of \$6363.50 for payments to pay caretakers.

F. CONFIDENTIALITY: Staff of the Office of Disciplinary Counsel (ODC) and the Board are required to maintain the confidentiality of complaints and related investigations and proceedings unless and until one of the exceptions to confidentiality, as set forth in Enforcement Rule 402, applies. ODC staff may interview the respondent-attorney or other persons who may have information that is relevant to your complaint, and may disclose information when disclosure is permitted or required by Court or Board Rules.

G. IMMUNITY:

Enforcement Rule 209(a) provides that any person who communicates with Disciplinary Counsel or the Board relating to misconduct by a respondent-attorney or gives testimony before a hearing committee or special master in a proceeding conducted pursuant to the Enforcement Rules, shall be immune from civil suit based upon such communication or testimony.

9-30-17

(Date)

(Your Signature)